FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

OTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** ORM LIMITED OFFERING EXEMPTION 1226251

OMB AP	PROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated averag hours per respo	
SEC USI	E ONLY
Prefix	Serial

DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series D Preference Share Financing	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	07073652
VeriSilicon Holdings (Cayman Islands) Co., Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 3F, Bldg 1, No. 200, Zhangheng Rd., Zhangjiang Hi-Tech Park, Pudong New Area, Shanghai, 201204, P.R.C.	Telephone Number (Including Area Code) 86-21-5131-1118
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Development & marketing of IC products & design services	PROCESSED
Type of Business Organization	D AUG 8 4 2007
corporation limited partnership, already formed	ACC 1 4 2007
	se specify): Exen Fl=QMSQN ith limited
Month Year	
Actual or Estimated Date of Incorporation or Organization: 0 6 0 2	ual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	FN

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

_ ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Each hemeficial owner having the power to view or dispose, and direct the vote or disposition of, 10% or more of a class of equity securities of the Issuers. Each hemeficial owner having the power to vote or dispose, and direct the vote or disposition of, 10% or more of a class of equity securities of the Issuers, Each hemeficial owner having the power to vote or dispose, and direct the vote or disposition of, 10% or more of a class of equity securities of the Issuers, Each hemeficial owner and provides of the Issuers and of company and the Issuers and or managing partner of partnership issuers. Check Box(es) that Apply:	A. BASIC IDENTIFICATION DATA
Managing Partner Basiness or Residence Address (Number and Street, City, State, Zip Code) Versilition Mediags (Cayman Islands) Co., Ltd., JF, Building, I, No. 200, Zhanghong Road, Zhangjiang Hi-Teck Park, Pudong New Area, Shanghai 201204 PRC Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Jernigan. Clark Business or Residence Address (Number and Street, City, State, Zip Code) 6/6 Austin Ventures, 300 West 6* Street, Suite 2300, Austin. TX 78701 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) 7/8, Hen Business or Residence Address (Number and Street, City, State, Zip Code) 6/6 Sierra Ventures, 2884 Sand Hill Road, Saite 100, Menlo Park, CA 94025 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Fartner Full Name (Last name first, if individual) 1. Lin, Peter Business or Residence Address (Number and Street, City, State, Zip Code) 6/6 Will Harper, SO California Street, Saite 2200, San Francisco, CA 94111 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) 1. Lin, Islanding Street, Saite 2200, San Francisco, CA 94111 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) 2. Lin, Linda Business or Residence Address (Number and Street, City, State, Zip Code) 6 State Cay Saite Cay	 Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Business or Residence Address (Number and Street, City, State, Zip Code) VerSilkion Hollings (Cayman Islands) Co., Ltd., 3F, Building I, No. 200, Zhangheng Road, Zhangliang Hi-Tech Park, Padong New Area, Shanghai 201204 PRC Cheek Box(es) that Apply:	
Business or Residence Address (Number and Street, City, State, Zip Code) Verisilition Holdings (Cayman Islands) Co., Ltd., 15. Building I, No. 200, Zhangkeng Road, Zhangliang HI-Tech Park, Padong New Area, Shanghai 201204 PRC Check Box(es) that Apply:	Full Name (Last name first, if individual)
VeriSilicon Holdings (Cayman Islandy) Co., Ltd., 3F. Buildings 1, No. 200, Zhangliang Road, Zhangliang Hi-Tech Park, Pudong New Area, Shanghai 201204 PRC Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Jeranglian, Clark Business or Residence Address (Number and Street, City, State, Zip Code) do Austin Ventures, 300 West 6° Street, Suite 2300, Austin, TX 78701 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Value Rose Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Lia, Peter Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Lia, Peter Business or Residence Address (Number and Street, City, State, Zip Code) do Wil Harper, 50 California Street, Suite 2920, San Francisco, CA 94111 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Lo. Lias Business or Residence Address (Number and Street, City, State, Zip Code) do Wil Harper, 50 California Street, Suite 2920, San Francisco, CA 94111 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Land, Marco Business or Residence Address (Number and Street, City, State, Zip Code) do Via Caravaggio, 40033 Casaleechio Italia Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Land, Marco Business or Residence Address (Number and Street, City, State, Zip Code) do Via Caravaggio, 40033 Casaleechio Italia Check Box(es)	Dai, Wayne Wei-Ming
3F. Building I, No. 200, Zhangheng Road, Zhangliang Hi-Tech Park, Pudong New Area, Shanghai 201204 PRC Check Box(es) that Apply:	Business or Residence Address (Number and Street, City, State, Zip Code)
Full Name (Last name first, if individual) Parnigan, Clark Business or Residence Address (Number and Street, City, State, Zip Code) c/o Austin Ventures, 300 West 6° Street, Suite 2300, Austin, TX 78701 Check Box(es) that Apply:	
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Business or Residence Address (Number and Street, City, State, Zip Code) c/o Austin Ventures, 300 West 6" Street, Suite 2300, Austin, TX 78701 Check Box(es) that Apply:	Full Name (Last name first, if individual)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Yu, Ben Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Lia, Peter Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Lia, Peter Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Lo, Lisa Business or Residence Address (Number and Street, City, State, Zip Code) Cho CID Group, 38 th Fl., 97 Tun Wa S. Road, Sec. 2, Taipel, Taiwan Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Landi, Marco Business or Residence Address (Number and Street, City, State, Zip Code) Cho Cla Group, 38 th Fl., 97 Tun Wa S. Road, Sec. 2, Taipel, Taiwan Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Landi, Marco Business or Residence Address (Number and Street, City, State, Zip Code) Cho Via Caravaggio, 40033 Casalecchio Italia Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Landi, Marco Business or Residence Address (Number and Street, City, State, Zip Code) Cho Via Caravaggio, 40033 Casalecchio Italia Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	Jernigan, Clark
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Full Name (Last name first, if individual) Yu, Ben Business or Residence Address (Number and Street, City, State, Zip Code) c/o Sierra Ventures, 2884 Sand Hill Road, Suite 190, Menlo Park, CA 94025 Check Box(es) that Apply:	c/o Austin Ventures, 300 West 6 th Street, Suite 2300, Austin, TX 78701
Yu, Ben Business or Residence Address (Number and Street, City, State, Zip Code) c'o Sierra Ventures, 2884 Sand Hill Road, Suite 100, Menlo Park, CA 94025 Cheek Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Liu, Peter Business or Residence Address (Number and Street, City, State, Zip Code) Vo WI Harper, 50 California Street, Suite 2920, San Francisco, CA 94111 Cheek Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Lo, Lisa Business or Residence Address (Number and Street, City, State, Zip Code) Code CID Group, 28th Fl., 97 Tun Wa S. Road, Sec. 2, Taipei, Taiwan Cheek Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Landi, Marco Business or Residence Address (Number and Street, City, State, Zip Code) 26 Via Caravaggio, 40033 Casalecchio Italia Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Landi, Marco Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Executive Officer Director General and/or Managing Partner	· · · · · · · · · · · · · · · · · · ·
c/o Sierra Ventures, 2884 Sand Hill Road, Suite 100, Menlo Park, CA 94025 Check Box(es) that Apply:	•
Managing Partner	
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26 Via Caravaggio, 40033 Casalecchio Italia Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Zhu, Linda Business or Residence Address (Number and Street, City, State, Zip Code) c/o VeriSilicon Holdings (Cayman Islands) Co., Ltd.,	Landi, Marco
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Full Name (Last name first, if individual) Zhu, Linda Business or Residence Address (Number and Street, City, State, Zip Code) c/o VeriSilicon Holdings (Cayman Islands) Co., Ltd.,	26 Via Caravaggio, 40033 Casalecchio Italia
Full Name (Last name first, if individual) Zhu, Linda Business or Residence Address (Number and Street, City, State, Zip Code) c/o VeriSilicon Holdings (Cayman Islands) Co., Ltd.,	
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Business or Residence Address (Number and Street, City, State, Zip Code) c/o VeriSilicon Holdings (Cayman Islands) Co., Ltd.,	
	c/o VeriSilicon Holdings (Cayman Islands) Co., Ltd.,

Check Box(es) that Apply:		Promoter	\boxtimes	Beneficial Owner	\boxtimes	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	indiv	idual)								
Arcelli, Federico										
Business or Residence Address	ss (Nu	mber and Street	, City	, State, Zip Code)						
22 Allee du Terme Blanc, Le	es Ha	uts des Vaugrer	iier, \	Villeneuve Loubet (6270	France				
Check Box(es) that Apply:		Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	indiv	idual)								
Zhang, Xiaonan										
Business or Residence Addres	ss (Nu	mber and Street	, City	, State, Zip Code)						
11399 Mustang Ridge Drive	, San	Diego, CA 9213	10							
Check Box(es) that Apply:		Promoter	\boxtimes	Beneficial Owner	Ġ	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	findiv	idual)								
Zhu, Min										
Business or Residence Addre	ss (Nu	mber and Street	, City	, State, Zip Code)						
Room 504, No. 4, Lane 20, 2	Kianzı	io Street, Shang	ghai,	PRC						
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	findiv	idual)								
IDG Technology Venture In	vestn	ents L.P								
Business or Residence Addre	ss (Nu	mber and Street	, City	, State, Zip Code)						
Room 1105, Aetna Tower, N	io. 10	7, Zunyi Road,	Shan	ghai, 200051, P.R. (China					
Check Box(es) that Apply:		Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	findiv	idual)								
iGlobe Partners Fund L.P.										
Business or Residence Addre	ss (Nu	mber and Street	, City	, State, Zip Code)						
435 Orchard Road, #19-03,	Wism	a Atria, Singap	ore 2	38877						
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	findiv	idual)								
International Network Capi	ital G	lobal Fund								
Business or Residence Addre	ss (Nu	imber and Street	, City	, State, Zip Code)						
50 California St., Suite 2920), San	Francisco, CA	9411	1						
Check Box(es) that Apply:		Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	f indiv	idual)								
International Network Cap	ital G	lobal Investmer	ıt Lir	nited						
Business or Residence Addre	ss (Nu	imber and Street	, City	, State, Zip Code)						
50 California St., Suite 2920), San	Francisco, CA	9411	11						
Check Box(es) that Apply:		Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individual)										
Intel Capital Corporation										
Business or Residence Addre	ss (Nu	ımber and Street	, City	, State, Zip Code)						
32/F, Two Pacific Place, 88	Queer	isway Central,	Hong	Kong						
				-						

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, i HSBC HAV2(I) Limited	f individual)				<u> </u>				
Business or Residence Addre	es (Number and Stree	t City State Zin Code)							
17/F, HSBC Building, 1 Qu	•								
	Promoter	Beneficial Owner	Executive Officer	Diameter.	☐ C11/				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, i	f individual)								
Nien Hsing International (I	Bermuda) Ltd.								
Business or Residence Addre	ess (Number and Stree	t, City, State, Zip Code)							
28th Fl., 97 Tun Wa Road, S	Sec. 2, Taipei, Taiwa	n							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, i	f individual)								
J&D Capital Corp.	,								
Business or Residence Addre	ess (Number and Stree	t, City, State, Zip Code)			·				
28th Fl., 97 Tun Wa Road, S	•								
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or				
					Managing Partner .				
Full Name (Last name first, i	f individual)								
A&D Capital Corp.									
Business or Residence Addre	ess (Number and Stree	t, City, State, Zip Code)							
28th Fl., 97 Tun Wa Road, S									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or				
			Em Direction of the or		Managing Partner				
Full Name (Last name first, i	f individual)								
CAM-CID Asia Pacific Inv	estment Corp.								
Business or Residence Addre	ess (Number and Stree	t, City, State, Zip Code)							
28th Fl., 97 Tun Wa Road, S	Sec. 2, Taipei, Taiwa	1	•						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or				
Full Name (1 ast C :					Managing Partner				
Full Name (Last name first, i	•								
Star Pacific Worldwide Lin									
Business or Residence Addre									
28th Fl., 97 Tun Wa Road, S									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, i	f individual)								
Asia Pacific Century Ventu	re Capital Ltd.								
Business or Residence Addre	ess (Number and Stree	t, City, State, Zip Code)							
28th Fl., 97 Tun Wa Road, S	Sec. 2, Taipei, Taiwa	1							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)									
AsiaGroup Worldwide Lim	•	•							
Business or Residence Addre		t, City, State. Zip Code)							
28th Fl., 97 Tun Wa Road, S									
	A MI (7 M)	<u> </u>			· · · ·				

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Asia Pacific Genesis Ventur	re Capital Fund L.P				
Business or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)			
28 th Fl., 97 Tun Wa Road, S	Sec. 2, Taipei, Taiwa	n			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	findividual)				
Springboard-Harper Techn	ology Fund (Cayma	ın) Ltd.			
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
250 North Bridge Road, #30	0-07, Raffles City To	ower, Singapore 179101			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Springboard-Harper Invest	ment (Cayman) Lto	l .			
Business or Residence Addre	ess (Number and Stree	et, City, State, Zip Code)			
250 North Bridge Road, #30	0-07, Raffles City To	ower, Singapore 179101			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Springboard-Harper Techn	ology Fund Pte. Ltd	l.			
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
250 North Bridge Road, #30	0-07, Raffles City To	wer, Singapore 179101			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
DeFilipps, Thomas C.					
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
c/o Wilson Sonsini Goodric	h & Rosati, 650 Pag	e Mill Road, Palo Alto, C	A 94304		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Sierra Ventures VII, L.P.					
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			·
c/o Sierra Ventures, 2884 S	and Hill Road, Suite	100, Menlo Park, CA 94	025		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Sierra Ventures VIII-A, L.I	Ρ.				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
c/o Sierra Ventures, 2884 Sa	and Hill Road, Suite	100, Menlo Park, CA 94	025		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Sierra Ventures VIII-B, L.I					
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
c/o Sierra Ventures, 2884 Sa		•	025		

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Sierra Ventures Associates	VII, LLC, as nomin	ee for its members			
Business or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)			
c/o Sierra Ventures, 2884 Sa	and Hill Road, Suit	e 100, Menio Park, CA 94	025		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i					
Sierra Ventures Associates					
Business or Residence Addre	·				
c/o Sierra Ventures, 2884 S	and Hill Road, Suite				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Austin Ventures IX, L.P.			 .		
Business or Residence Addre	•	- · · · · · · · · · · · · · · · · · · ·			
c/o Austin Ventures, 300 W	est 6 th Street, Suite	2300, Austin, TX 78701-39	902		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	•			
LSI Corporation					
Business or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)			
1621 Barber Lane, Milpitas	, CA 95035-7451				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
IBM WTC Asia Investment	s, LLC				
Business or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)			
New Orchard Road, Armor	ık, NY 10504				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
VantagePoint Venture Part	ners 2006 (Q), L.P.				
Business or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)			
1001 Bayhill Drive, Suite 30	0 San Bruno, CA	94066			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Lehman Brothers Venture	Capital 2003 Partne	ership			
Business or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)			
3000 Sand Hill Road, Build	ing 3, Suite 190, Me	nlo Park, CA 94025			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Lehman Brothers Venture	Partners, 2003-P, L	.р.			
Business or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)			
3000 Sand Hill Road, Build	ing 3, Suite 190, Me	nlo Park, CA 94025		 	

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Lehman Brothers Venture	Partners 2003-C, L.I	·			
Business or Residence Addre 3000 Sand Hill Road, Buildi	`				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	individual)				
Lehman Brothers Venture	Capital Partners II,	L.P.			
Business or Residence Addre	ss (Number and Stree	t, City, State, Zip Code)			
3000 Sand Hill Road, Build	ing 3, Suite 190, Mer	ilo Park, CA 94025			

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					B.	INFOF	RMATION .	ABOUT OF	FFERING				•
1 1	laa tha is	muar gold	on dogg the i	anan intand i	to call to ma	n naanaditad	investore in (this affanias?	,	· · · · · · · -		Yes	No ⊠
l. F	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												
2. V	Vhat is th	he minimu	m investmen	t that will be		• • • • • • • • • • • • • • • • • • • •		_	muer OEOE.			\$	0.00
					•	·						Yes	No
			-	-			-	-	indirectly, and f a person to be	•			
								-	name of the b				
	han five lealer on:		s to be listed:	are associated	d persons of	such a broke	τ or dealer, y	ou may set fo	orth the inform	nation for th	at broker or		
			st, if individı	ıa!)							•		
n/a													
Busine	ss or Re	sidence Ac	doress (Numb	per and Stree	t, City, State	, Zip Code)							
n/a	C 1	I.D I											
	of Assoc	nated Brok	er or Dealer										
n/a States	in Which	h Person L	isted Has So	licited or Inte	ends to Solic	it Purchasers	 }						
(Ch	eck "All	States" or	check indivi-	duals States)								Па	ll States
•				·								_	
[A	-	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[11.	-]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[M	IT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
{R	1}	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (Las	st name fir	st, if individu	ıal)							 		
n/a	`			. ,									
Busine	ss or Re	sidence Ac	dress (Num	per and Stree	t, City, State	, Zip Code)							
n/a													
	of Assoc	tated Brok	er or Dealer										
n/a States	in Which	n Person L	isted Has Sol	icited or Inte	nds to Solic	it Purchasers							
(Ch	eck "All	States" or	check indivi-	duals States)								Па	11 States
(A			[AZ]	,									
-	-	[AK]		[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[11]		[IN]	[IA]	[KS]	{KY}	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[M	1T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R	I]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	[PR]
Full N	ame (Las	st name fir	st, if individu	nal)									
n/a													
	ss or Re	sidence Ac	ldress (Numb	er and Stree	t, City, State	, Zip Code)							
n/a Name	of Assoc	riated Brok	er or Dealer										
n/a	oi Assoc	lated Dion	ici oi Dealei										
	in Which	n Person L	isted Has So	icited or Inte	nds to Solic	it Purchasers	<u> </u>	···					
(Ch	eck "All	States" or	check indivi	duals States)								☐ Ai	I States
[A	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[11]	_]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[M	IT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	{OR}	[PA]
[R	I]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
				(Use l	olank sheet,	or copy and	use additiona	l copies of th	nis sheet, as n	ecessary)			

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount Aiready
	Type of Security	Offering Price	Sold
	Debt	\$0.00	\$0.00_
	Equity	\$ <u>20,000,003.46</u>	\$ <u>20,000,003.46</u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$0.00	\$0.00
	Partnership Interests	\$0.00	\$0.00
	Other (Specify)	\$ <u>0.00</u>	\$0.00
	Total	\$ <u>20,000,003.46</u>	\$ 20,000,003.46
	Answer also in Appendix, Column 3, if filing under ULOE.		
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited investors	24	\$ <u>20,000,003.46</u>
	Non-accredited Investors	0	.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ <u>.00</u>
	Printing and Engraving Costs		\$\$
	Legal Fees	\boxtimes	\$150,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$8
	Total	\boxtimes	\$150,000.00
(1) \$	300.00 cash received upon issuance of warrants; up to \$828,000.00 to be received upon exercise of warrants.		

	C. OFFERING P	RICE, NUMBER OF INVESTORS, EXPENSES A	ND USE OF PE	ROCEEDS		
	total expenses furnished in response to Part C	offering price given in response to Part C - Question P-Question 4.a. This difference is the "adjusted gross			\$ <u>19,85</u> 0),003.46
5.	the purposes shown. If the amount for any purp	proceeds to the issuer used or proposed to be used for ose is not known, furnish an estimate and check the bolisted must equal the adjusted gross proceeds to the isse.	x to the			
			Officers, i	ents to Directors & liates	Payme Oth	nts To ers
	Salaries and fees		S	0.00	□ \$	0.00
	Purchase of real estate			0.00	□ \$	0.00
	Purchase, rental or leasing and installation of r	nachinery and equipment	🗆 \$	0.00	☐ \$	0.00
	Construction or leasing of plant buildings and	facilities	🗆 \$	0.00	☐ \$	0.00
	Acquisition of other businesses (including the used in exchange for the assets or securities of	value of securities involved in this offering that may be another issuer pursuant to a merger)	oe 	0.00	□ s	0.00
	Repayment of indebtedness		□ s	0.00	□s	0.00
	Other (specify):		D \$_	0.00	s	0.00
				0.00		
		led)		_	0,003.46	0,005.40
					5,000.10	
		D. FEDERAL SIGNATURE			_	
ınde	issuer has duly caused this notice to be signed by the traking by the issuer to furnish the U.S. Securities edited investor pursuant to paragraph (b)(2) of Rule	e undersigned duly authorized person. If this notice is file and Exchange Commission, upon written request of its s 502.	ed under Rule 505 taff, the informati	, the following on furnished b	signature con y the issuer t	stitutes an o any non-
lssu	er (Print or Type)	Signature	Date			
	Silicon Holdings (Cayman Islands) Co., Ltd.	fromas Lethor	August 1, 200	7		
	ne of Signer (Print or Type) mas C. DeFilipps	Title of Signer (Print or Type) Corporate Secretary				
			······································			_
			σ	7 (0)		
			ر کرک			
	<u> </u>	ATTENTION				
	Intentional Misstatements or C	missions of Fact Constitute Federal Criminal Viole	ations (See 18	USC 1001	Y	